

Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000179357 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : DANIEL HICKS, P.A.

Account Number: 075061003325 Phone : (352)351-3353 : (352)351-8054 Fax Number

LIMITED LIABILITY COMPANY

JAMES W. NORMAN, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Electronic Filing Menu.

Corporate Filing

OIVISION OF CORPOREIG

7/26/2005

(((H05000179357 3))

ARTICLES OF ORGANIZATION OF JAMES W. NORMAN, L.L.C.

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Chapter 608, Florida Statutes, hereby make, acknowledge, and file the following Articles of Organization.

ARTICLE I

The name of the limited liability company shall be JAMES W. NORMAN, L.L.C., ("Company"). The principal office and mailing address of the Company in Florida shall be 5225 SE 39th Loop, Ocala, Florida 34480.

ARTICLE II

This is a single member Limited Liability Company, to be managed by the Member, the single Member is James W. Norman, who address is 5225 SE 39th Loop, Ocala, Florida 34480.

ARTICLE III PURPOSES AND POWERS

The general purpose for which the Company is organized is to conduct any lawful business for which a limited liability company may be organized under the laws of the State of Florida. The Company shall have all the powers granted to a limited liability company under the laws of the State of Florida.

ARTICLE IV REGISTERED OFFICE AND AGENT

The name and street address of the registered agent of the Company in the State of Florida is James W. Norman, 5225 SE 39th Loop, Ocala, Florida 34480.

ARTICLE V CAPITAL CONTRIBUTIONS

The Member of the Company shall contribute to the capital of the Company the cash or property set forth as follows:

(((H05000179357 3)))

Jul-26-05 1:39PM;

Page 3/5

Sent By: DANIEL HICKS P.A.;

352 351 8054;

(((H05000179357 3))

NAME

CAPITAL CONTRIBUTION

% Membership Units

James W. Norman

\$1000,00

100%

100

ARTICLE VI TERMINATION OF EXISTENCE (CONTINUITY OF LIFE)

The company shall be dissolved upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of the Member.

IN WITNESS WHEREOF, the undersigned organizer have made and subscribed these Articles of Organization at Ocala, Florida, for the foregoing uses and purposes this 26 day of July, 2005.

JAMEN W. NORMUN

James W. Norman

STATE OF FLORIDA COUNTY OF MARION

Before me, personally appeared, James W. Norman, to me well known and known to me to be the person described in and who executed the foregoing Articles of Organization and acknowledged to and before me that he executed said instrument for the purposes therein expressed, and that he is personally known to me or has produced Fl. Ruck biture as identification.

WITNESS my hand and official seal this 26° day of July, 2005.

Notary Public, State of Florida

DEBBIE MATHE MY COMMISSION # 512278325

EXPIRES: January 1, 2006 WALCOND COMP

(((H05000179357 3)))

(((H05000179357 3))

ACCEPTANCE OF REGISTERED AGENT

I, the undersigned person, having been named as registered agent and to accept services of process for the above-stated limited liability company at the place designated in this statement, hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Dated, this _26 day of July, 2005.

James W. Norman

JAMES W. NORMAN



(((H05000179357 3))

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name and address of the limited liability company is JAMES W. NORMAN, L.L.C., 5225 SE 39th Loop, Ocala, Florida 34480.
- 2. The name and address of the registered agent and office is; James W. Norman, 5225 SE 39th Loop, Ocala, Florida 34480.

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

James W. Norman July 26 TH 2008

